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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing  
OR  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 1-2-0432.1US

First Named Inventor Cave et al.

**COMPLETE IF KNOWN**

Application Number 10/748,015

Filing Date December 30, 2003

Group Art Unit Not Yet Known

Examiner Name Not Yet Known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SYSTEM AND METHOD FOR DETERMINING MEASUREMENT VALUE FOR  
RADIO RESOURCE MANAGEMENT IN WIRELESS COMMUNICATIONS**

the specification of which (Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 12/30/2003 as United States Application Number or PCT International

Application Number 10/748,015 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/480,844	06/23/2003	

[Page 1 of 4 ]

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number  
OR

24374

☐ Registered practitioner(s) name/registration number listed below

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Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C.			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 24374 OR ☐ Correspondence address below

Name	VOLPE AND KOENIG, P.C. DEPT ICC				
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Christopher		Cave			
Inventor's Signature				Date	
Residence: City	Candiac	State	Quebec	Country	Canada
Post Office Address	63 Place Chambord				
Post Office Address					
City	Candiac	State	Quebec	ZIP	J5R 4W7
		Country	Canada		

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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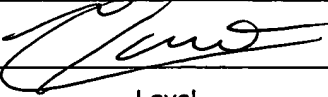
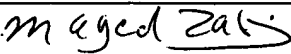
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**DECLARATION****ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
Page 1 of 2

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Angelo		Cuffaro	
Inventor's Signature 		Date	
Residence: City	Laval	State	Quebec
		Country	Canada
Citizenship Canada			
Mailing Address 3837 Place du Brigadier			
Mailing Address			
City	Laval	State	Quebec
		ZIP	H7E 5M7
		Country	Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Teresa Joanne		Hunkeler	
Inventor's Signature		Date	
Residence: City	Montreal	State	Quebec
		Country	Canada
Citizenship Canada, Swiss			
Mailing Address 4243 Wilson Avenue			
Mailing Address			
City	Montreal	State	Quebec
		ZIP	H4A 2V1
		Country	Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Maged		Zaki	
Inventor's Signature 		Date March 25, 2004	
Residence: City	Pierrefonds	State	Quebec
		Country	Canada
Citizenship Canada			
Mailing Address 9260 Ceres, Apt. 202			
Mailing Address			
City	Pierrefonds	State	Quebec
		ZIP	H8Y 3N5
		Country	Canada

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Attny: Docket No. I-2-0432.1US

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## DECLARATION

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Supplemental Sheet  
Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Guodong		Zhang	
Inventor's Signature		Date	
Residence: City	Patchogue	State	NY
Country	USA	Citizenship	China
Mailing Address 41 La Bonne Vie Drive			
Mailing Address			
City	Patchogue	State	NY
ZIP	11722	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Juan Carlos		Zuniga	
Inventor's Signature		Date	
Residence: City	Montreal	State	Quebec
Country	Canada	Citizenship	Mexico
Mailing Address 955 Rue Gohier Ville St. Laurent			
Mailing Address			
City	Montreal	State	Quebec
ZIP	H4L 3J4	Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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	<b>First Named Inventor</b>	Cave et al.
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	10/748,015
	<b>Filing Date</b>	December 30, 2003
	<b>Group Art Unit</b>	Not Yet Known
	<b>Examiner Name</b>	Not Yet Known

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Place Customer Number Bar Code Label here

☐ OR Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C.			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 24374 OR ☐ Correspondence address below

Name	VOLPE AND KOENIG, P.C. DEPT ICC				
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname			
Christopher		Cave			
Inventor's Signature				Date	
Residence: City	Candiac	State	Quebec	Country	Canada
Post Office Address	63 Place Chambord				
Post Office Address					
City	Candiac	State	Quebec	ZIP	J5R 4W7
				Country	Canada

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Attny. Docket No. I-2-0432.1US

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**DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet**Page 1 of 2

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Angelo		Cuffaro	
Inventor's Signature		Date	
Residence: City	Laval	State	Quebec
Country	Canada	Citizenship	Canada
Mailing Address 3837 Place du Brigadier			
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City	Laval	State	Quebec
ZIP	H7E 5M7	Country	Canada
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Given Name (first and middle [if any])		Family Name or Surname	
Teresa Joanne		Hunkeler	
Inventor's Signature <i>Teresa Hunkeler</i>		Date <i>June 10, 2004</i>	
Residence: City	Montreal	State	Quebec
Country	Canada	Citizenship	Canada, Swiss
Mailing Address 4243 Wilson Avenue			
Mailing Address			
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ZIP	H4A 2V1	Country	Canada
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<b>Inventor's Signature</b>			<b>Date</b>
<b>Residence: City</b>	Patchogue	<b>State</b>	NY
		<b>Country</b>	USA
<b>Citizenship</b> China			
<b>Mailing Address</b> 41 La Bonne Vie Drive			
<b>Mailing Address</b>			
<b>City</b>	Patchogue	<b>State</b>	NY
		<b>ZIP</b>	11722
		<b>Country</b>	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Juan Carlos		Zuniga	
<b>Inventor's Signature</b>			<b>Date</b>
<b>Residence: City</b>	Montreal	<b>State</b>	Quebec
		<b>Country</b>	Canada
<b>Citizenship</b> Mexico			
<b>Mailing Address</b> 955 Rue Gohier Ville St. Laurent			
<b>Mailing Address</b>			
<b>City</b>	Montreal	<b>State</b>	Quebec
		<b>ZIP</b>	H4L 3J4
		<b>Country</b>	Canada
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Given Name (first and middle [if any])		Family Name or Surname	
<b>Inventor's Signature</b>			<b>Date</b>
<b>Residence: City</b>		<b>State</b>	
		<b>Country</b>	
<b>Citizenship</b>			
<b>Mailing Address</b>			
<b>Mailing Address</b>			
<b>City</b>		<b>State</b>	
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Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

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Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))				Family Name or Surname			
Christopher				Cave			
Inventor's Signature						Date	
Residence: City	Candiac	State	Quebec	Country	Canada	Citizenship	Canada
Post Office Address	63 Place Chambord						
Post Office Address							
City	Candiac	State	Quebec	ZIP	J5R 4W7	Country	Canada

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



Please type a plus sign (+) inside this box → ☐

Attny. Docket No. I-2-0432.1US

PTO/SB/02A (11-00)  
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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Angelo		Cuffaro	
Inventor's Signature		Date	
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		Country	Canada
Citizenship			
Canada			
Mailing Address			
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Mailing Address			
City	Laval	State	Quebec
		ZIP	H7E 5M7
		Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Teresa Joanne		Hunkeler	
Inventor's Signature		Date	
Residence: City	Montreal	State	Quebec
		Country	Canada
Citizenship			
Canada, Swiss			
Mailing Address			
4243 Wilson Avenue			
Mailing Address			
City	Montreal	State	Quebec
		ZIP	H4A 2V1
		Country	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Maged		Zaki	
Inventor's Signature		Date	
Residence: City	Pierrefonds	State	Quebec
		Country	Canada
Citizenship			
Canada			
Mailing Address			
9260 Ceres, Apt. 202			
Mailing Address			
City	Pierrefonds	State	Quebec
		ZIP	H8Y 3N5
		Country	Canada

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**DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet**Page 2 of 2

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Guodong		Zhang	
Inventor's Signature 		Date 03/19/2004	
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Country	USA	Citizenship	China
Mailing Address 41 La Bonne Vie Drive			
Mailing Address			
City	Patchogue	State	NY
ZIP	11722	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Juan Carlos		Zuniga	
Inventor's Signature		Date	
Residence: City	Montreal	State	Quebec
Country	Canada	Citizenship	Mexico
Mailing Address 955 Rue Gohier Ville St. Laurent			
Mailing Address			
City	Montreal	State	Quebec
ZIP	H4L 3J4	Country	Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case.